PCT

WORLD INTELLECTUAL PROPERTY ORGANIZATION International Bureau



(51) International Patent Classification 6:	Ī	(11) International Publication Number: WO 99/07831
C12N 5/06, 5/08	A1	
	<u> </u>	(43) International Publication Date: 18 February 1999 (18.02.99)
(21) International Application Number: PCT/EP (22) International Filing Date: 5 August 1998 ((30) Priority Data: MI97A001898 7 August 1997 (07.08.97)	(05.08.9	BY, CA, CH, CN, CU, CZ, DE, DK, EE, ES, FI, GB, GE,
(71) Applicant (for all designated States except US): S.P.A. [IT/IT]; Via Campo di Pile, I-67100 L'Aq		E' IE, IT, LU, MC, NL, PT, SE), OAPI patent (BF, BJ, CF,
(72) Inventors; and (75) Inventors/Applicants (for US only): LAZZARI, [IT7/IT]; Via Campo di Pile, I-67100 L'Aq REBULLA, Paolo [IT/IT]; Via Campo di Pile, L'Aquila (IT). SIRCHIA, Girolamo [IT/IT]; Via Pile, I-67100 L'Aquila (IT). (74) Agent: MINOJA, Fabrizio; Bianchetti Bracco Minoja	uila (I , I–671 Campo	(r). With international search report. di
Rossini, 8, I-20122 Milano (IT).		
(54) Title: METHOD FOR THE EX-VIVO EXPANSIO	N OF	HEMATOPOIETIC STEM CELLS
(57) Abstract		
The present invention provides a method for the ex-	-vivo e	pansion of hematopoietic stem cells and a culture medium for stem cells.
·		•
		·

FOR THE PURPOSES OF INFORMATION ONLY

Codes used to identify States party to the PCT on the front pages of pamphlets publishing international applications under the PCT.

Slovenia Slovakia Senegal

Yugoslavia Zimbabwe

Senegal
Swaziland
Chad
Togo
Tajikitan
Turkmenistan
Turkey
Trinidad and Tobago
Ukraine
Ueanda

Uganda
United States of America
Uzbekistan
Viet Nam

SI
SK
SN
SZ
TD
TG
TJ
TM
TR
TT
UA
UG
US
VN
YU
ZW

AL	Albania	ES	Spain	LS	Lesotho
AM	Armenia	FI	Finland	LT	Lithuania
АT	Austria	FR	France	LU	Luxembourg
ΑU	Australia	GA	Gabon	LV	Latvia
ΑZ	Azerbaijan	GB	United Kingdom	MC	Monaco
BA	Bosnia and Herzegovina	GE	Georgia	MD	Republic of Moldova
BB	Barbados	GH	Ghana	MG	
BE	Belgium	GN	Guinea	MK	Madagascar
BF	Burkina Faso	GR	Greece	MIK	The former Yugoslav
BG	Bulgaria	HU	Hungary	ML	Republic of Macedonia
BJ	Benin	IE	Ireland	MN	Mali
BR	Brazil	īL	Israel		Mongolia
BY	Belarus	IS	Iceland	MR	Mauritania
CA	Canada	IT	Italy	MW	Malawi
CF	Central African Republic	JР	•	MX	Mexico
CG	Congo	KE	Japan	NE	Niger
CH	Switzerland	KG	Kenya	NL	Netherlands
CI	Côte d'Ivoire	KP	Kyrgyzstan	NO	Norway
CM	Cameroon	KP	Democratic People's	NZ	New Zealand
CN	China	****	Republic of Korea	PL	Poland
CU	Cuba	KR	Republic of Korea	PT	Portugal
CZ		KZ	Kazakstan	RO	Romania
DE	Czech Republic	rc	Saint Lucia	RU	Russian Federation
DK	Germany	u	Liechtenstein	SD	Sudan
RE DK	Denmark	LK	Sri Lanka	SE	Sweden
B.E.	Estonia	LR	Liberia	SG	Singapore

METHOD FOR THE EX-VIVO EXPANSION OF HEMATOPOIETIC STEM CELLS

A large number of onco-hematologic diseases can often be treated only with bone-marrow transplantation. It is rather difficult to find a donor with identical HLA within the patient's family and thus, hematopoietic stem cell transplantation from non-related donors represents a novel therapy for those patients who need bone-marrow transplantation but do not have donor-siblings with identical HLA.

5

10

15

Even though the number of bone-marrow donors has increased in donors' registries, only 20-30% candidates find compatible donors, whereas ethnic minorities are poorly represented (Sonnenberg F. et al.., Blood 74:2569-79, 1989).

A severe graft versus host disease (GVDH) is associated with almost 40% transplants of bone marrow obtained from a related donor and with 60-80% transplants based on non-related donors (Hows J et al.. Blood; 68:1322-4, 1986).

cord blood hematopoietic stem cells can reconstitute the human hematopoietic system and thus they represent an alternative to bone marrow stem cells. The following advantages are associated with stem cells available from placental blood (stored in cord blood banks as cryopreserved cell collections), in comparison with bone marrows available from donor registries,:

 A good amount of placental blood can be easily obtained, without any risk either for the mother or for the newborn,

CONFIRMATION COPY

- 2. Infective agents such as cytomegalovirus (CMV) are less frequent in newborns than in adults;
- 3. Placental blood can be cryopreserved for many years and it is available in short time;
- 5 4. a higher possibility to find a donor also for ethnic minorities;
 - 5. less stringent requirements of HLA match (histocompatibility);
- 6. a less frequent graft versus host disease (GVDH)

 10 after transplantation with placental blood
 (Broxmeyer HE et al.., Int. J. Cell. Cloning 8: 7691, 1990; Broxmeyer HE et al.., Proc. Natl. Acad.
 Sci. USA 86:3828-32, 1989).
- So far, the use of cord blood in adult patients has encountered some problems due to the content of stem cells in a cord blood unit, which is frequently not sufficient for transplantation in adults (Kurtzberg J. et al.., N. Eng. J. Med. 335:157-166, 1996; Wagner JE et al.., Lancet 346:214-219, 1995; Locatelli F. et al.., Bone Marrow Transplant 18:1095-1101, 1996).

The high doses of chemotherapy, followed by transplantation of stem cells, provoke immunodepression in the patient who thus needs long periods of time for restoring the platelet and erythrocyte activities.

- Furthermore, the patient needs many transfusions of several units of platelet and erythrocyte blood components, thus increasing the costs of bone marrow transplantation. The ex-vivo expansion of hematopoietic cells may play an important role in the solution of the problems associated with transplantation and its costs
- problems associated with transplantation and its costs.
 Clinical trials have shown that expanded cells do not

3

induce toxicity but, on the contrary, they offer several advantages (McAdams TA et al.., Trends Biotechnol. 14:388-96, 1996). The expansion of stem cells from placental blood might improve the therapeutic approach to bone-marrow transplantation for the following reasons:

- 1. The ex-vivo expansion of hematopoietic precursors maintaining a non-committed population, allows
- a) the transplantation of adult patients (Kurtzberg J et al.. N Engl J Med 335:157-166, 1996; Wagner JE et al.. Lancet 346:214-219, 1995; Locatelli F et al.. Bone Marrow Transplant 17:31-37, 1996; Locatelli F et al.. Bone Marrow Transplant 18:1095-1101, 1996)
- b) the preparation of aliquots which can be frozen in case of relapse of the same patient (Lu L. et al.. In vivo 10:229-32, 1996)
 - c) protocols of gene therapy.

5

10

2. The ex-vivo expansion of hematopoietic precursors towards a committed population (megakaryocytes and erythroblasts) may provide a cell pool which can be frozen and transplanted into the same patient during the succeeding phases of the disease. (Lu L. et al.. In vivo 10:229-32, 1996). This procedure is in order to shorten the time to hematological reconstitution (Emerson SG. Blood 87: 3082-8, 1996).

The ex-vivo expansion is an interesting approach for maintaining hematopoietic stem cells both qualitatively and quantitatively. The cell maturation obtained through the expansion represents a crucial

4

5

10

15

20

25

point for the achievement of a suitable clinical application of the product. Actually, the expansion effectiveness and the maturation of the expanded cells can be influenced by many factors among which the static or bioreactor culture, the growth factors and the incubation period are the most critical ones (Haylock DN. et al.., Blood 80:1405-12, 1992; Brugger W. et al.., Blood 81:2579-84, 1993; Sato N. et al.. Blood 82:3600-9, 1993). Proliferation and maturation of hematopoietic cells are strictly regulated by factors that positively modulate primitive stem cell proliferation multilineage or unilineage differentiation. A number of cytokines have been utilized in an attempt to promote human hematopoietic stem cell self-renewal. Although a variety of culture conditions have been defined which promote expansion of committed progenitor conditions do not presently exist that permit long-term expansion of stem cells (Zijlmans JMJ et al.. Proc Natl Acad Sci USA 92:8901-5, 1995; Zijlmans JMJ et al.. Proc Natl Acad Sci USA 95:725-9, 1998; Bradford GB et al.. Exp Hematol 25:445-53, 1997; Rebel VI et al.. Blood 83: 128-36, 1994).

In fact several authors have obtained committed populations: Haylock et al.. achieved a 66-fold expansion using 6 growth factors (IL-1, IL-3, IL-6, G-CSF, SCF) and a 14-day liquid culture. Brugger et al.. obtained a 190-fold expansion with 6 factors (IL-3, IL-1, IL-6, SCF, EPO, interferon-g) in 12-14 days.

So far, no scientific investigation has furnished either the final evidence of the CD34+ stem-cell self renewal ability or a procedure through which such non-

5

committed population could be maintained. The loss of population with CD34+ immunophenotype in favour of subpopulations with CD34+/33+ and CD34+/38+ phenotype, i.e. the continuous decrease of precursors, unambiguously shows the loss of proliferative ability of the expanded precursors. Up to now, this has limited the use of expanded-cell suspensions for transplantation, in all those cases in which hematopoiesis was not supported by sources of non-purified and non-expanded stem cells.

So far, IL-3 and SCF are the most used cytokines for obtaining a precursor expansion, even if the addition of these growth factors has a negative effect, because they induce maturation of primitive stem cells (e.g. towards the neutrophil subpopulation) at the expense of self-renewal.

10

15

20

25

30

Two cytokines named Flt-3 and TPO have recently been found and more recently they have been deeply investigated in combination with other growth factors (Koller MR et al..., J. Hematother. 5:449-59, 1996; Kaushansky K. et al..., Nature, 369:519-20, 1995). It has been reported that c-mpl is expressed exclusively on hematopoietic tissue, particularly hematopoietic stem cells, megakaryocytes and platelets. Even if the role of TPO and Flt-3 is becoming increasingly evident on the normal haematopoieis (Kaushansky K et al... Blood 86:419-31, 1995). These cytokines have been found not to have a high activity when used alone, but when combined with other cytokines, their real effect cannot be appreciated due to the presence of more potent growth factors such as IL-3 and SCF.

6

The CD34+38- immunophenotype defines a primitive subpopulation of progenitor cells and the maintenance of these cells continues to be a subject of ongoing study (randal TD et al.. Blood 87:4057, 1996).

Now, a method has been found for the ex-vivo expansion of stem cells which allows to maintain a part of the cell population in form of CD34+ non-committed cells having self-renewal properties. This method allows to maintain the expansion in constant proliferative growth up to 15 weeks or more, thus obtaining the desired qualitative (CD34+/38- phenotype) and quantitative (cell number) expansion.

5

10

15

20

25

30

The method according to the invention comprises culturing stem cells in a culture medium containing a mixture of cytokines/growth factors consisting of thrombopoietin (TPO), interleukin 6, interleukin 11 (IL-6 and IL-11) and flt-3 ligand (FL).

These components are commercially available or they can be prepared through recombinant-DNA techniques, and they are added to the culture medium at a final concentration of 1 to 100 ng/ml. Preferably, each of these components is added to the culture medium at a final concentration of 10 ng/ml. The culture medium, which is a further object of the invention, contains also other conventional components such as fetal bovine serum or albumin. The culture of stem cells, which can be obtained, for example, from cord blood or from other sources (e.g. bone-marrow or peripheral blood), is carried out under humidified atmosphere containing 5% CO₂ for periods of time ranging from few days (for example 10 days) to several weeks (20 or more). The

7

expansion obtained by the method of the invention is clearly higher than that so far obtainable with different cytokine cocktails. In fact recently a combination of cytokines including FL+IL-6+IL-11 has been tested in a paper of Ohmizono et al.. (Leukemia 11: 524-30, 1997), but the efficiency of the expansion has been lower and for up to 21 days.

Description of figures:

5

25

30

Figure 1 shows the cellular expansion obtained 10 using the method and the medium of the invention, therefore after culture of purified CD34+ cells in the presence of serum-free medium and FL+TPO+IL-6+IL-11. The Cd34+ cells were purified through separation columns and cultured for 15 weeks in serum-free medium and 15 FL+TPO+IL-6+IL-11. Every week the cultures demipopulated and cytokines and fresh medium were added. From the data reported in figure 1, a 107-fold expansion of the number of nucleated cells is observed and it is clear that an expansion higher than 106 can be obtained 20 just after 15-weeks culture.

Figure 2 shows the median of the expansion of CD34+/38- cells obtained after culture in the serum free medium containing FL+TPO+IL-6+IL-11. The cells were stained after expansion and counted by flow cytometric analysis using a FACScan analyzer. This figure shows that the number of CD34+/CD38- non-committed cells is 100.000 times higher than the initial number.

Figure 3 shows the median of expansion of CFU-GM colonies obtained in presence of serum-free medium containing FL+TPO+IL-6+IL-11. The cells were seeded in methylcellulose after expansion. This figure shows that

R

the number of CFU-GM colonies is 100.000 times higher than the initial number.

The following examples illustrate the invention in more detail.

5 EXAMPLE 1

10

15

20

25

30

CD34+ cell purification

Cord Blood samples were collected after cesarean section or vaginal delivery. Cord blood was collected by venipuncturing the main vessel at the free end of the cord using a Maco Pharma bag with 29 ml citrate-phosphate-dextrose (CPD) as anticoagulant. The placenta was washed out to collect the blood that remains in vessels. Mononuclear cells were isolated by Ficoll gradient (1.077 g/ml; Lympholite-H, Cedarlane Laboratories, Ontario, Canada) and CD34+ cells were purified through separation columns (CellPro Inc, Bothell, Wash., USA or MiniMACS, Milteryi, Germany).

EXAMPLE 2

An aliquot of the CD34+ target cell fraction was analyzed to determine purity by flow cytometry. The final recovery of CD34+ cells ranged from 70% to 98% of the initial CD34+ population and the analysis of the enriched cell fraction, performed with an anti-CD34+ monoclonal antibody (Becton Dickinson, Mountain View, California, USA) revealed a purity of 85% to 98% CD34+ cells. The trypan-blue dye exclusion test showed a viability of 96%-99%. The CD34+ cells were seeded for the clonogenic assay.

Liquid cultures of CD34+ cells

CD34+ cells were plated at 3-5x10⁴/ml, in Tissue Culture Flasks. A serum-free medium containing different

9

concentrations of growth factors as indicated was used.

TPO, FL, IL-6 and IL-11 (Peprotech EC Ltd, London , England) were added to stroma-free liquid cultures of purified CD34+ CB cells. Cells were incubated for more than 15 weeks at 37°C in fully humidified atmosphere in 58 CO_2 air.

Clonogenic assay

10

15

20

25

Colony-forming units (CFU) were evaluated in 35 mm dishes by plating 2.5x10³ nucleated cells in 1 ml medium containing 0.9% methylcellulose, 30% FBS, 1% BSA, 10⁻⁴ M 2-mercaptoethanol, 3 U/ml erythropoietin, 50 ng/ml SCF, 10 ng/ml GM-CSF, 10 ng/ml IL-3 (StemCell Technologies, Vancouver, Canada). After 14 days of culture at 37°C in a 5% CO₂ fully humidified atmosphere, cultures larger than 50 cells were scored by microscopy as colony forming cells (CFC), i.e. the sum of CFU-GM (containing granulocytes and macrophages), Burst Forming Unit-Erythroid (BFU-E, containing erythroid cells), and CFU-GEMM (containing myeloid cells, erythroid cells and megakaryocytes).

Flow Cytometry

CD34+ cultured cells were stained with one or more of the following monoclonal antibodies: anti-CD34, -CD61 (gpIIIa), -CD38. For flow cytometry analysis 5×10^5 cells were incubated with monoclonal antibodies for 30 minutes at 4°C and washed twice in PBS. Cells were analyzed by flow cytometry using a FACScan analyzer (Becton Dickinson) equipped with a filter set for FITC-PE dual-color fluorescence.

The percent of stained cells was determined as compared to PE- and FITC-conjugated mouse IgG1 isotypic

10

control (Becton Dickinson). Cell viability was evaluated by staining cells with 7-AAD, and viable cells were gated.

In vitro assay in NOD/SCID mice

The use of the ex vivo expanded cells in NOD/SCID mice is up to now an experiment to demonstrate the capacity of these expanded cells to reconstitute the bone marrow with a complete engraftment. Moreover these experiments add a new step towards the implementation of clinical expansion protocols.

NOD/SCID mice were sublethally irradiated The immediately before intravenous tail-vein injection containing an appropriate number of expanded cells. The duration of this assay was 8 weeks. Flow cytometric analysis was performed on peripheral blood and bone marrow after death of mice. The presence of cells positive for human CD34+, CD19+, CD42a+ antigens was relevant after transplantation (until to 15-19%, 14-16%, 13-15% of the total cells respectively). All colonies, obtained after culturing bone marrow cells (clonogenic assay), were plucked from plates and were analyzed by a human-specific PCR (Polymerase Chain Reaction): the PCR signals were positive for the human Cart-1 Controls consisted of PCRs for human Cart-1 from human peripheral blood leukocytes (positive) and normal mouse bone marrow cells (negative). The signals were of human origin.

This assay has indicated the capacity of these expanded cells to home the mice bone marrows.

25

5

10

15

20

CLAIMS

- 1. A method for the ex vivo expansion of hematopoietic stem cells which comprises culturing said stem cells in
- 5 a culture medium containing a mixture of cytokines/growth factors consisting of thrombopoietin, interleukin 6, interleukin 11 and Flt-3 ligand.
 - 2. A method according to claim 1, characterized in that the hematopoietic stem cells are obtained from cord
- 10 blood or other suitable sources.
 - 3. A method according to claim 1 or 2, characterized in that the culture is maintained for a time ranging from 10 days to 15 weeks.
 - 4. A method according to any one of the above claims,
- in which the culture medium contains interleukin 6, interleukin 11, thrombopoietin and Flt-3 ligand, each at a concentration ranging from 1 to 100 ng/ml.
 - 5. A method according to claim 4, in which the concentration of interleukin 6, interleukin 11,
- thrombopoietin and Flt-3 ligand in the culture medium is 10 ng/ml.
 - 6. A method according to claim 1 wherein the cells are 1000000-fold expanded.
- 7. A culture medium for hematopoietic stem cells containing a mixture of cytokines/growth factors consisting of thrombopoietin, interleukin 6, interleukin 11 and Flt-3 ligand.
 - 8. A culture of hematopoietic stem cells obtainable by the method of claims 1-6.
- 9. A colture according to claim 8 in which the number of CD34+/CD38- non-committed cells is 100.000

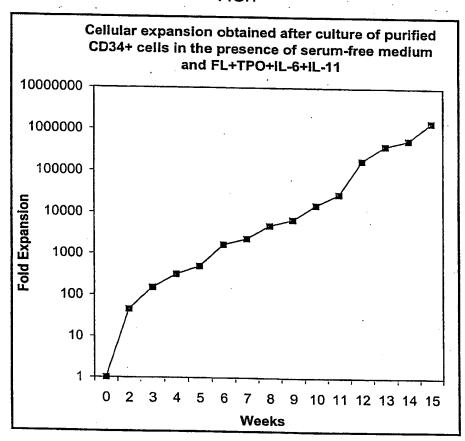
WO 99/07831

PCT/EP98/04882

12 times higher than the initial number.

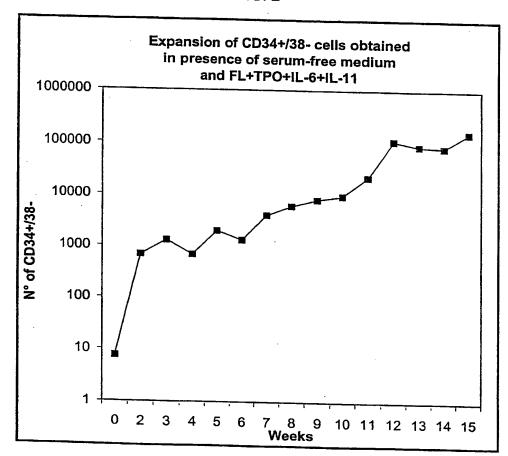
SHEET 1/3

FIG.1



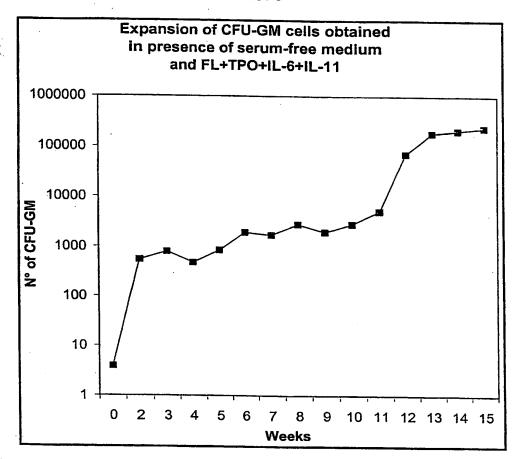
SHEET 2/3

FIG. 2



SHEET 3/3

FIG. 3



INTERNATIONAL SEARCH REPORT

inte Jonal Application No PCT/EP 98/04882

		[
A. CLASSI IPC 6	FICATION OF SUBJECT MATTER C12N5/06 C12N5/08			
	o International Patent Classification(IPC) or to both national classificat	ion and IPC		
	SEARCHED		:	
1PC 6	ocumentation searched (classification system followed by classification C12N			
	tion searched other than minimum documentation to the extent that su		ched .	
Electronic d	data base consulted during the international search (name of data bas	e and, where practical, search terms used)		
C. DOCUM	ENTS CONSIDERED TO BE RELEVANT			
Category 3	Citation of document, with indication, where appropriate, of the rele	vant passages	Relevant to claim No.	
X	OHMIZONO Y. ET AL: "Thrombopoiet augments ex vivo expansion of hum blood-derived hematopoietic proge combination with stem cell factor ligand"	1-9		
	LEUKEMIA, vol. 11, no. 4, April 1997, pages XP002053902 *whole article, especially table	j		
X	WO 97 16535 A (SANDOZ LTD ;SYSTEM (US); SANDOZ AG (DE); SANDOZ AG (9 May 1997 see the whole document	ITX TNC	8,9	
А	EP 0 627 487 A (IMMUNEX CORP) 7 December 1994 see the whole document	1-9		
Fur	ther documents are listed in the continuation of box C.	X Patent family members are listed in	n annex.	
	ategories of cited documents :	"T" later document published after the inter	national filing date	
consi "E" earlier	nent defining the general state of the art which is not Idered to be of particular relevance r document but published on or after the International	or priority date and not in conflict with cited to understand the principle or the invention "X" document of particular relevance; the c	the application but sory underlying the	
oitatic	nent which may throw doubts on priority claim(s) or h is cited to establish the publication date of another on or other special reason (as specified) ment referring to an oral disclosure, use, exhibition or	cannot be considered novel or cannot be considered to involve an inventive step when the document is taken alone "Y" document of particular relevance; the claimed invention cannot be considered to involve an inventive step when the document is combined with one or more other such docu-		
"P" docun	r means nent published prior to the international filing date but than the priority date claimed	ments, such combination being obvious to a person skilled in the art. "&" document member of the same patent family		
Date of the	e actual completion of theInternational search	Date of malling of the international search report		
	17 November 1998	23/11/1998		
Name and	mailing address of the ISA European Patient (Illice, P.B. 5818 Patentiaan 2	Authorized officer		
	NL - 2280 HV Rijswijk Tel. (+31-70) 340-2040, Tx. 31 651 epo nl, Fax: (+31-70) 340-3016	Fernandez y Brana	s,F	

INTERNATIONAL SEARCH REPORT

Information on patent family members

Inte Jonal Application No PCT/EP 98/04882

	itent document I in search report		Publication date		atent family nember(s)	Publication date
WO	9716535	Α	09-05-1997	AU EP	7495396 A 0858503 A	22-05-1997 19-08-1998
EP	0627487		07-12-1994	US	5554512 A	10-09-1996
				` AU	683472 B	13-11-1997
	•			UA	6987794 A	20-12-1994
				BR	9407073 A	27-08-1996
			•	CA	2162397 A	08-12-1994
				CN	1125479 A	26-06-1996
				CZ	9503079 A	16-10-1996
				FΪ	955646 A	23-01-1996
				HU	74831 A	28-02-1997
				JP	8511251 T	26-11-1996
				NO	954735 A	23-01-1996
				NZ	267541 A	24-06-1997
				PL	311756 A	18-03-1996
				WO	9428391 A	08-12-1994
				ZA	9403490 A	23-01-1995
		*		AU	2098295 A	25-09-1995
				CN	1142247 A	05-02-1997
				EP	0749472 A	27-12-1996
				FI	963373 A	29-08-1996
				NO	963630 A	07-11-1996
				NZ	282999 A	19-12-1997
				WO	9524469 A	14-09-1995



PCT

WORLD INTELLECTUAL PROPERTY ORGANIZATION International Bureau



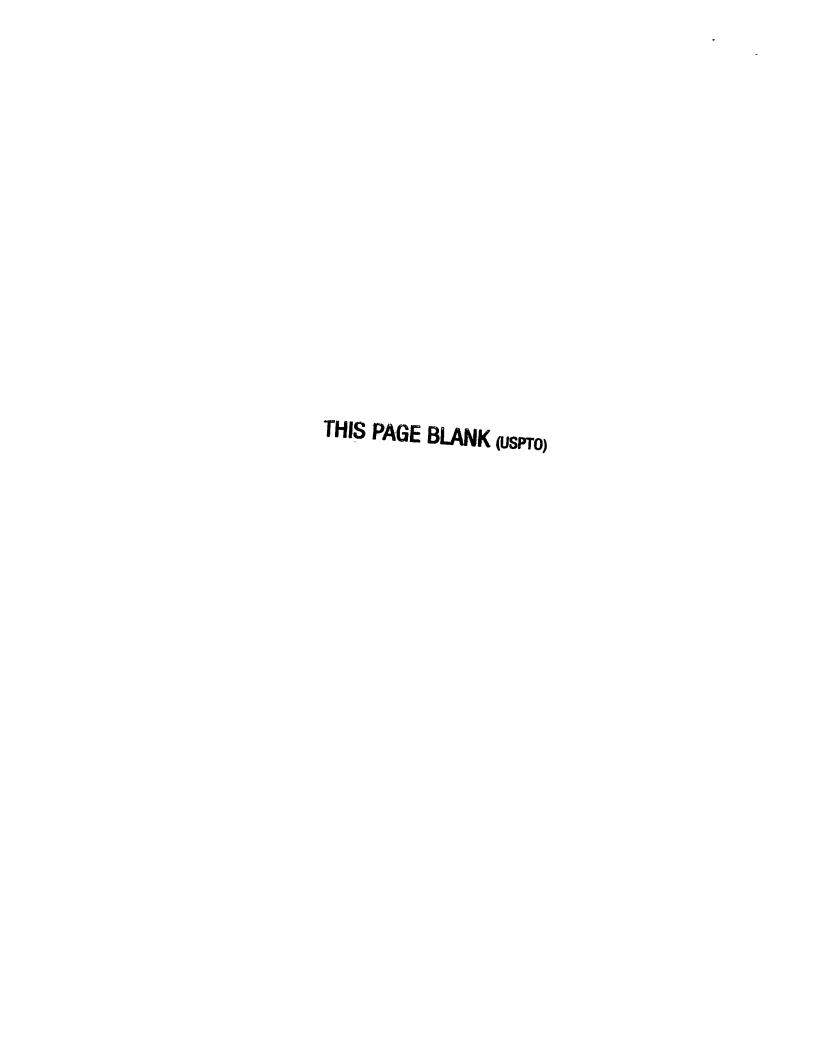
INTERNATIONAL APPLICATION PUBLISI	HED U	NDER THE PATENT COOPERATION TREATY (PCT)		
(51) International Patent Classification ⁶ :		(11) International Publication Number: WO 99/07831		
C12N 5/06, 5/08	A1	(43) International Publication Date: 18 February 1999 (18.02.99)		
(21) International Application Number: PCT/EP (22) International Filing Date: 5 August 1998 ((81) Designated States: AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CU, CZ, DE, DK, EE, ES, FI, GB, GE, GH, GM, HR, HU, ID, IL, IS, JP, KE, KG, KP, KR, KZ,			
(30) Priority Data: MI97A001898 7 August 1997 (07.08.97) (71) Applicant (for all designated States except US): S.P.A. [IT/IT]; Via Campo di Pile, I-67100 L'Aqu	DOMPI	LC, LK, LR, LS, LT, LU, LV, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, UA, UG, US, UZ, VN, YU, ZW, ARIPO T patent (GH, GM, KE, LS, MW, SD, SZ, UG, ZW), Eurasian patent (AM, AZ, BY, KG, KZ, MD, RU, TJ, TM), European patent (AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE), OAPI patent (BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG).		
(72) Inventors; and (75) Inventors/Applicants (for US only): LAZZARI, [IT/IT]; Via Campo di Pile, I-67100 L'Aqu REBULLA, Paolo [IT/IT]; Via Campo di Pile, L'Aquila (IT). SIRCHIA, Girolamo [IT/IT]; Via C Pile, I-67100 L'Aquila (IT).	ila (∏ 1—6710). With international search report.		
(74) Agent: MINOJA, Fabrizio; Bianchetti Bracco Minoja Rossini, 8, I–20122 Milano (IT).	S.r.l., V	ia ·		
(54) Title: METHOD FOR THE EX-VIVO EXPANSION	N OF H	EMATOPOIETIC STEM CELLS		
(57) Abstract	🕶			
50.00	vivo ex	pansion of hematopoietic stem cells and a culture medium for stem cells.		



FOR THE PURPOSES OF INFORMATION ONLY

Codes used to identify States party to the PCT on the front pages of pamphlets publishing international applications under the PCT.

AL	Albania	ES	Spain	LS	Lesotho	SI	Slovenia
AM	Armenia	FI	Finland	LT	Lithuania	SK	Slovakia
AT	Austria	FR	Prance	LU	Luxemboure	SN	
ΑÜ	Australia	GA	Gabon	LV	Latvia	SZ	Senegal
ΑZ	Azerbaijan	GB	United Kingdom	MC	Monaco	TD	Swaziland Chad
BA	Bosnia and Herzegovina	GE	Georgia	MD	Republic of Moldova	TG	
BB	Barbados	GH	Ghana	MG	Madagascar	T.J	Togo
BE	Belgium	GN	Guinea	MK	The former Yugoslav	TM	Tajikistan
BF	Burkina Faso	GR	Greece		Republic of Macedonia	TR	Turkmenistan
BG	Bulgaria	HU	Hungary	ML	Mali	TT	Turkey
BJ	Benin	IE	Ireland	MN	Mongolia	UA.	Trinidad and Tobago
BR	Brazil .	IL	Israel	MR	Mauritania	UG	Ukraine
BY	Belarus	IS	Iceland	MW	Malawi	US	Uganda
CA	Canada	IT	Italy	MX	Mexico	UZ	United States of America
CF	Central African Republic	JР	Japan	NE	Niger		Uzbekistan
CG	Congo	KE	Kenya	NL	Netherlands	VN	Viet Nam
CH	Switzerland	KG	Kyrgyzstan	NO	Norway	ΥU	Yugoslavia
CI	Côte d'Ivoire	KP	Democratic People's	NZ	New Zealand	zw	Zimbabwe
CM	Cameroon		Republic of Korea	PL	Poland		
CN	China	KR	Republic of Korea	PT	Portugai		
CU	Cuba	KZ	Kazakstan	RO	Romania		
CZ	Czech Republic	LC	Saint Lucia	RU	Russian Federation		
DE	Germany	LI	Liechtenstein	SD	Sudan		
DK	Denmark	LK	Sri Lanka	SE	Sweden		
EE	Estonia	LR	Liberia	SG	Singapore		



METHOD FOR THE EX-VIVO EXPANSION OF HEMATOPOIETIC STEM CELLS

A large number of onco-hematologic diseases can often be treated only with bone-marrow transplantation. It is rather difficult to find a donor with identical HLA within the patient's family and thus, hematopoietic stem cell transplantation from non-related donors represents a novel therapy for those patients who need bone-marrow transplantation but do not have donor-siblings with identical HLA.

5

10

15

20

25

Even though the number of bone-marrow donors has increased in donors' registries, only 20-30% candidates find compatible donors, whereas ethnic minorities are poorly represented (Sonnenberg F. et al.., Blood 74:2569-79, 1989).

A severe graft versus host disease (GVDH) is associated with almost 40% transplants of bone marrow obtained from a related donor and with 60-80% transplants based on non-related donors (Hows J et al.. Blood; 68:1322-4, 1986).

Cord blood hematopoietic stem cells can reconstitute the human hematopoietic system and thus they represent an alternative to bone marrow stem cells. The following advantages are associated with stem cells available from placental blood (stored in cord blood banks as cryopreserved cell collections), in comparison with bone marrows available from donor registries,:

 A good amount of placental blood can be easily obtained, without any risk either for the mother or for the newborn,

CONFIRMATION COPY

THIS PAGE BLANK (USPTO)